FORM B10 (3/98)		
United States Bankruptcy Court  District of Idaho  Complete this form and mail to: U.S. Bankruptcy Court 550 W. Fort St. Boise, ID 83724		PROOF OF CLAIM THIS SPACE IF FOR COURT USE ONLY U.S. COURTS  19 FEB - 8 PM 4: 38  760'0 FILED CAMERON S. BURKE CLERK IDAHO
Name of Debtor: Hugg, Kenneth L. dba Cataldo Press	Case Number: 99-00115	
Chapter: 13 Trustee: John H. Krommenh Proof of claim form and all supporting documents must be filed in DUPL  NOTE: This form should not be used to make a claim for an administration of the case. A "request" for payment of an administrative expense may be file.	ICATE on Chapter 12 and 13 cases we expense arising after the commencement	
Name of Creditor (The person or other entity to whom the debtor owes money or property):  Ada County Treasurer P.O. Box 2868 Boise, Idaho 83701	<ul> <li>□ Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.</li> <li>□ Check box if you have never received any notices from the bankruptcy court in this case.</li> <li>□ Check box if the address differs from the address on the envelope.</li> </ul>	
Account or other number by which identifies debtor: R1943002790 - 1998 & 1999	Check here if this claim:   Replaces   Amends a previously filed claim dated:	
1. Basis for Claim ☐ Goods Sold ☐ Services Performed ☐ Retiree benefits as defined in 11 U.S.C. §1114(a) ☐ Other (please describ ☐ Wages, Salaries and compensation: Your Social Security Numb ☐ Unpaid Compensation for services performed from ☐	pe):	ury/Wrongful Death ⊠Taxes
2. Date debt was incurred: First Position Lien as of Jan 1 each year. I.C. § 63-206	3. If court Judgment, date obtained:	
4. SECURED CLAIM  ☐ Check box if your claim is secured by collateral (including a right of setoff)  Brief Description of Collateral: ☐ Real Estate ☐ Motor Vehicle ☐ Other ☐ Value of Collateral \$ 77,300.00  Amount of arrearage and other charges at time the case was filed included in secured claim, if any:  \$\$\frac{1,400.70 *}{2}\$\$	5. UNSECURED PRIORITY CLAIM  Check box if you have an unsecured priority claim  Amount entitled to priority \$  SPECIFY PRIORITY OF CLAIM:  Wages, Salaries, or commissions (up to \$4000)* earned within 90 days before filing of the bankruptcy petition or cessation or the debtor's business, whichever is earlier. (11 U.S.C. § 507 (a)(3))  Contributions to an employee benefit plan (11 U.S.C. § 507 (a)(4))  Up to \$1,800* of deposits toward purchase, lease, or rental of property or services for personal, family or household use (11 U.S.C. § 507 (a)(6))  Alimony, maintenance, or support owed to a spouse, former spouse or child (11 U.S.C. § 507 (a)(7))  Taxes or penalties owed to governmental units (11 U.S.C. § 507 (a)(8))  Other - Specify applicable paragraph of (11 U.S.C. § 507 (a)(	
Plus interest accruing at 1% per month - Idaho Code § 63-1001		
* Includes a one time late charge of 2% as provided by statute.	*Amounts are subject to adjustment on 4/1/9 respect to cases commenced on or after the G	
6. TOTAL AMOUNT OF CLAIM AT TIME CASE WAS FILED  UNSECURED \$ SECURED \$ 1,400.70  PRIORITY \$ TOTAL \$ 1,400.70  Check box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all additional charges.		- And Andrews Control of the Control
7. Credits: The amount of all payments on this claim has been credited a	and deducted for the purpose of making this	s proof of claim.